

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with initial Filing <input checked="" type="checkbox"/> Declaration Submitted after initial Filing (surcharge (37 CFR 1.16 (e)) required) NOV 09 2001 PCT OFFICE	Attorney Docket No. IN-5475
	First Named Inventor Christopher J. BRADFORD et al.
	COMPLETE IF KNOWN
	Application Number 09/940,748
	Filing Date August 28, 2001
Group Art Unit	
Examiner Name	

As below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DUAL CURE COATING COMPOSITION AND PROCESSES FOR USING THE SAME

(Title of the Invention)

The specification of which:

☐ is attached hereto

☒ Was filed on **August 28, 2001** as United States Application or PCT International Application Number **09/940,748** and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application

I hereby claim foreign priority benefits under 35, U.S.C § 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365 (a) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below, by checking the box, any foreign application(s) for patent or inventor's certificate, or any PCT international application(s) having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date DATE/MONTH/YEAR	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application number are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C 119(e) of any United States provisional application(s) listed below:

APPLICATION NUMBER(S)	FILING DATE	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

Additional U. S. applications:

U. S. PARENT APPLICATION NUMBER(S)	PCT PARENT NUMBER	PARENT FILING DATE (MM/DD/YYYY)	PARENT PATENT NUMBER (IF APPLICABLE)

POWER OF ATTORNEY

☒

I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

☒

Customer Number or Bar Code Label



26922

PATENT & TRADEMARK OFFICE

or ☐

Correspondence address below

County

United States of America

Telephone

(248) 948-2020

Fax

(248) 948-2093

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name OF SOLE OR FIRST INVENTOR:

☐

A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Christopher J.

Family Name
or Surname

BRADFORD

Inventor's
Signature

Date

August 24, 2001

Residence: City

Ypsilant

State

Michigan

Country

United States
of America

Citizenship

American

Mailing Address

7926 Ramblewood Street

City

Ypsilant

State

Michigan

Zip

48197

NOV 09 2001
PATENT-TRADEMARK OFFICE

POWER OF ATTORNEY

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

☒ Customer Number or Bar Code Label

26922

PATENT-TRADEMARK OFFICE

or ☐ Correspondence address below

County	United States of America	Telephone	(248) 948-2020	Fax	(248) 948-2093
--------	--------------------------	-----------	----------------	-----	----------------

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Additional Joint Inventor, If any:

☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any])

Marcy

Family Name
or Surname

ZIMMER

Inventor's
Signature

Date

11/7/01

Residence: City

Warren

State

Michigan

Country

United States
of America

Citizenship

American

Mailing Address

24734 Virginia Avenue

City

Warren

State

Michigan

Zip

48091

POWER OF ATTORNEY

NOV 09 2001

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

☒ Customer Number or Bar Code Label

26922

PATENT-TRADEMARK OFFICE

or ☐ Correspondence address below

County	United States of America	Telephone	(248) 948-2020	Fax	(248) 948-2093
--------	--------------------------	-----------	----------------	-----	----------------

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Ryan F.				O'DONNELL			
Inventor's Signature				Date			
				August 28, 2001			
Residence: City		State		Country		Citizenship	
Brighton		Michigan		United States of America		American	
Mailing Address		6280 Wagon Road					
City		State		Zip		48116	
Brighton		Michigan					

[Page ____]

Declaration for Utility or Design Patent Application (PTO/SB/01) [1-1.1]

NOV 09 2001

POWER OF ATTORNEY

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

☒ Customer Number or Bar Code Label

26922

PATENT-TRADEMARK OFFICE

or ☐ Correspondence address below

County	United States of America	Telephone	(248) 948-2020	Fax	(248) 948-2093
--------	--------------------------	-----------	----------------	-----	----------------

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Lyle				CAILLOUETTE			
Inventor's Signature				Date			
<i>Lyle Caillorette</i>				August 28, 2001			
Residence: City		Farmington Hills		State		Michigan	
Country		United States of America		Citizenship		American	
Mailing Address				28428 West 8 Mile, Apartment C7			
City		Farmington Hills		State		Michigan	
Zip		48336					

[Page of _____]

Declaration for Utility or Design Patent Application (PTO/SB/01) [1-1.1]

NOV 09 2001

POWER OF ATTORNEY

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

☒ Customer Number or Bar Code Label

26922

PATENT-TRADEMARK OFFICE

or ☐ Correspondence address below

County	United States of America	Telephone	(248) 948-2020	Fax	(248) 948-2093
--------	--------------------------	-----------	----------------	-----	----------------

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Additional Joint Inventor, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Jennifer A.				Family Name or Surname RISCHKE			
Inventor's Signature <i>Jennifer Rischke</i>				Date <i>Sept 25, 2001</i>			
Residence City Windsor		State Ontario		Country Canada		Citizenship Canadian	
Mailing Address 1396 Moy Avenue							
City Windsor		State Ontario		Zip		N8X 456	

[Page of ____]

Declaration for Utility or Design Patent Application (PTO/SB/01) [1-1.1]